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# Short Form Return of Organization Exempt From Income Tax

## 2013

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury  
Internal Revenue Service

Open to Public  
Inspection

**A** For the 2013 calendar year, or tax year beginning and ending

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization: **HUDSON COUNTY BAR ASSOCIATION**

**D** Employer identification number: **22-2230712**

Number and street (or P O box, if mail is not delivered to street address) Room/suite **E** Telephone number  
**583 NEWARK AVENUE** **201-798-4708**

City or town, state or province, country, and ZIP or foreign postal code **F** Group Exemption Number ▶  
**JERSEY CITY, NJ 07306**

**G** Accounting Method  Cash  Accrual Other (specify) ▶ \_\_\_\_\_

**H** Check  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**I** Website: ▶ **WWW.HCBALAW.COM**

**J** Tax-exempt status (check only one) —  501(c)(3)  501(c) ( **6** ) ◀ (insert no)  4947(a)(1) or  527

**K** Form of organization  Corporation  Trust  Association  Other \_\_\_\_\_

**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **197,536.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)		Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>	
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received	<b>1</b>	3,000.
	<b>2</b> Program service revenue including government fees and contracts	<b>2</b>	86,636.
	<b>3</b> Membership dues and assessments	<b>3</b>	107,900.
	<b>4</b> Investment income	<b>4</b>	
	<b>5a</b> Gross amount from sale of assets other than inventory	<b>5a</b>	
	<b>b</b> Less cost or other basis and sales expenses	<b>5b</b>	
	<b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	<b>5c</b>	
	<b>6</b> Gaming and fundraising events		
	<b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000)	<b>6a</b>	
	<b>b</b> Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	<b>6b</b>	
<b>c</b> Less direct expenses from gaming and fundraising events	<b>6c</b>		
<b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	<b>6d</b>		
<b>7a</b> Gross sales of inventory, less returns and allowances	<b>7a</b>		
<b>b</b> Less cost of goods sold	<b>7b</b>		
<b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<b>7c</b>		
<b>8</b> Other revenue (describe in Schedule O)	<b>8</b>		
<b>9</b> Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>9</b>	197,536.	
<b>Expenses</b>	<b>10</b> Grants and similar amounts paid (list in Schedule O)	<b>10</b>	
	<b>11</b> Benefits paid to or for members	<b>11</b>	
	<b>12</b> Salaries, other compensation, and employee benefits	<b>12</b>	136,249.
	<b>13</b> Professional fees and other payments to independent contractors	<b>13</b>	8,880.
	<b>14</b> Occupancy, rent, utilities, and maintenance	<b>14</b>	5,656.
	<b>15</b> Printing, publications, postage, and shipping	<b>15</b>	8,557.
	<b>16</b> Other expenses (describe in Schedule O) SEE SCHEDULE O	<b>16</b>	31,496.
<b>17</b> Total expenses. Add lines 10 through 16	<b>17</b>	190,838.	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9)	<b>18</b>	6,698.
	<b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	<b>19</b>	49,400.
	<b>20</b> Other changes in net assets or fund balances (explain in Schedule O)	<b>20</b>	0.
	<b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20	<b>21</b>	56,098.

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2013)

SCANNED DEC 1 2 2014

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**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Sch. O to respond to any question in this Part V

		Yes	No	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X	
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X	
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		X	
35b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	N/A		
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		X	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X	
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	0.		
37b	Did the organization file Form 1120-POL for this year?		X	
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X	
38b	If "Yes," complete Schedule L, Part II and enter the total amount involved	N/A		
39	Section 501(c)(7) organizations Enter			
39a	Initiation fees and capital contributions included on line 9	N/A		
39b	Gross receipts, included on line 9, for public use of club facilities	N/A		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911	N/A		
	section 4912	N/A		
	section 4955	N/A		
40b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	N/A		
40c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	N/A		
40d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization	N/A		
40e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X	
41	List the states with which a copy of this return is filed	NONE		
42a	The organization's books are in care of	ALAN C MARGULIES, CPA	Telephone no	201-333-0666
	Located at	HARBORSIDE PLAZA 10, SUITE 1201, 3 SECOND ST, JE	ZIP + 4	07311
42b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country		X	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
42c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country		X	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year		<input type="checkbox"/>	
		43	N/A	
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X	
44b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X	
44c	Did the organization receive any payments for indoor tanning services during the year?		X	
44d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X	
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)			

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office?  Yes  No  
 If "Yes," complete Schedule C, Part I 46

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Sch C, Part II  Yes  No  
 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48    
 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a    
 b If "Yes," was the related organization a section 527 organization? 49b

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
N/A				

f Total number of other employees paid over \$100,000 ▶ \_\_\_\_\_

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None" N/A

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ \_\_\_\_\_

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A  Yes  No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** Date 11/13/14  
 Signature of officer [Signature]  
 Type or print name and title President HCBA

**Paid Preparer Use Only**

Print/Type preparer's name <b>ALAN C MARGULIES</b>	Preparer's signature <u>[Signature]</u>	Date <b>11/11/14</b>	Check <input checked="" type="checkbox"/> if self-employed	PTIN <b>P00206255</b>
Firm's name ▶ <b>ALAN C. MARGULIES, CPA</b>		Firm's EIN ▶ <b>22-3004338</b>		
Firm's address ▶ <b>HARBORSIDE PLZ 10 #1201 JERSEY CITY, NJ 07311-3988</b>		Phone no <b>201-333-0666</b>		

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

Open to Public  
Inspection

Name of the organization

HUDSON COUNTY BAR ASSOCIATION

Employer identification number

22-2230712

**FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:**

DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
AUTOMOBILE EXPENSE	12.
BOOKS/DUES/SUBSCRIPTIONS	105.
EDUCATION/SEMINARS	837.
INSURANCE	7,238.
OFFICE SUPPLIES & EXPNESE	20,126.
PAYROLL SERVICE FEES	167.
PERMITS	200.
CREDIT CARD FEES	2,596.
WEBSITE EXPENSE	215.
TOTAL TO FORM 990-EZ, LINE 16	31,496.

**FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:**

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DUE FROM HUDSON COUNTY BAR FOUNDATION	47,844.	35,581.

**FORM 990-EZ, PART II, LINE 26, OTHER LIABILITIES:**

DESCRIPTION	BEG. OF YEAR	END OF YEAR
DUE TO LEGALITIES	4,222.	4,222.
PAYROLL LIABILITIES	5,241.	3,031.
TOTAL TO FORM 990-EZ, LINE 26	9,463.	7,253.

**FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE - THE HUDSON COUNTY BAR ASSOCIATION HAS BEEN DEDICATED TO ADVANCING ITS MEMBERS' PROFESSIONAL DEVELOPMENT, PROMOTING THE HIGHEST STANDARDS OF EXCELLENCE IN THE**

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public  
inspection

Name of the organization

HUDSON COUNTY BAR ASSOCIATION

Employer identification number

22-2230712

PRACTICE OF LAW, AND FACILITATING ACCESS TO LEGAL SERVICES FOR THE  
HUDSON COUNTY COMMUNITY. THE HCBA ENCOURAGES QUALITY AND ETHICS IN THE  
PRACTICE OF LAW THROUGH THE PROFESSIONAL DEVELOPMENT OF OUR MEMBERS.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:

ADVANCING MEMBERS' PROFESSIONAL DEVELOPMENT, PROMOTING THE  
HIGHEST STANDARDS OF EXCELLENCE IN THE PRACTICE OF LAW,  
AND FACILITATING ACCESS TO LEGAL SERVICES FOR THE HUDSON  
COUNTY COMMUNITY

FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:

THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,  
OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.  
THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,  
OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

**OFFICERS**

<u>Name</u>	<u>Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Norberto A. Garcia President <a href="mailto:norberto@garcialawnj.com">norberto@garcialawnj.com</a>	N Garcia,LLC 551 Summit Ave Jersey City, NJ 07306-2701	Tel: (201)876-8930 Fax: (201) 876-8931 cell: (201)412-8758	1 Year Rotate Up
Stephen J. McCurrie President Elect <a href="mailto:stephen@mccurrielaw.com">stephen@mccurrielaw.com</a>	McCurrie, McCurrie & McCurrie 680 Kearny Avenue Kearny, NJ 07032	Tel. (201)997-2100 Fax: (201)997-9567 Cell: (201) 988-5524	1 Year Rotate Up
Gregory G. Diebold First Vice-President <a href="mailto:gdiebold@lsnj.org">gdiebold@lsnj.org</a>	HC Legal Services 574 Summit Avenue Jersey City, NJ 07306	Tel: (201)792-6363 xt 3216 Fax: (201)798-8780 Cell: (201)994-5534	1 Year Rotate Up
Lori Cieckiewicz Second Vice-President <a href="mailto:LC@DADLC.com">LC@DADLC.com</a>	D' Alessandro & Cieckiewicz, PC 3279 Kennedy Blvd Jersey City, NJ 07306	Tel: (201)653-4340 Fax: (201)653-1871 Cell: (201) 370-8816	1 Year Rotate Up
Jonathan Koles Recording Secretary <a href="mailto:jkoles@kbblegal.com">jkoles@kbblegal.com</a>	Koles Burke & Bustillo 2600 Kennedy Blvd., Suite 1K Jersey City, NJ 07306	Tel (201)200-0300 Fax: (201)798-1393	1 Year Rotate Up
Kimberly Espinales Membership Secretary <a href="mailto:Kim_espinales@hotmail.com">Kim_espinales@hotmail.com</a>	Law office of Edward Hoagland, Jr. 343 Thornall Street, Suite 500 Edison NJ 08837	Tel: (973)292-7107	1 Year Rotate Up
Leo Hurley Treasurer <a href="mailto:lhurley@archerlaw.com">lhurley@archerlaw.com</a>	Herten Burstein Sheridan Cevasco Bottunelli Litt & Harz,LLC 21 Main Street Hackensack, NJ 07601-7054	Tel: (201) 342-6000 Fax: (201) 342-6611	1 Year Rotate Up

**TRUSTEES**

<u>Name</u>	<u>Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Brian J. Neary Immediate Past President <a href="mailto:Briannearny@rcn.com">Briannearny@rcn.com</a>	Law Office of Brian Neary 1 Newark Street Hoboken, New Jersey 07030	Tel: (201)420-8101 Fax: (201)420-8102 Cell: (201) 370-8606	One year as past pres Rotate Off
Jose Vilarino YLD President <a href="mailto:jvilarino@chasanlaw.com">jvilarino@chasanlaw.com</a>	Chasan Leyner & Lamparello, PC 300 Harmon Meadow Blvd., 6th Fl. Secaucus, New Jersey 07094	Tel: (201)348-6000 Fax: (201)348-6633	1 year YLD President
Gerald H. Baker <a href="mailto:ghb@bakerlaw-nj.com">ghb@bakerlaw-nj.com</a>	Baker, Pedersen & Robbins, PA 1 Newark Street Hoboken, NJ 07030	Tel: (201)659-2635 Fax: (201)659-1400	Constitutional
Mark A. Blacher, Esq.	618 Newark Avenue Jersey City, NJ 07306	Tel: 201-653-0930 Fax: 201-792-7736	December-13
Brunilda Bonilla <a href="mailto:bonillalawoffice@cs.com">bonillalawoffice@cs.com</a> <a href="mailto:bonillalawoffice@verizon.net">bonillalawoffice@verizon.net</a>	Law Offices of Brunilda Bonilla 3332 Kenndey Blvd. 1st Floor Jersey City, NJ 07307	Tel: (201)653-7101 Fax: (201)659-7450	December-14
Anthony D'Elia, Esq. <a href="mailto:adelia@chasanlaw.com">adelia@chasanlaw.com</a>	Chasan Leyner & Lamparello, PC 300 Harmon Meadow Blvd., 6th Fl. Secaucus, New Jersey 07094	Tel: (201)348-6000 Fax: (201)348-6633	December-13
James F. Dronzek <a href="mailto:jfdronzek@chasanlaw.com">jfdronzek@chasanlaw.com</a>	Chasan Leyner & Lamparello, PC 300 Harmon Meadow Blvd., 6th Fl. Secaucus, New Jersey 07094	Tel: (201)348-6000 Fax: (201)348-6633	December-13

<u>Name</u>	<u>TRUSTEE Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Gregory T. Farmer <a href="mailto:gfarmer@farmerandcampen.com">gfarmer@farmerandcampen.com</a>	Law Office of Gregory T. Farmer 415 32nd Street Union City, NJ 07087	Tel: (201)348-0990 Fax: (201)348-6803	HCBf President
Robert E. Finn Young Lawyer President <a href="mailto:rfinn@chasanlaw.com">rfinn@chasanlaw.com</a>	Chasan Leyner & Lamparello, PC 300 Harmon Meadow Blvd , 6th Fl. Secaucus, New Jersey 07094	Tel: (201)348-6000 Fax: (201)348-6633	December-13
Brian C. Freeman <a href="mailto:Freegert@aol.com">Freegert@aol.com</a>	Brian C Freeman, LLC 26 Journal Square Jersey City, New Jersey	Tel: (201)222-7765 Fax: (201)432-8123	December-13
Karla Y. Garcia, Esq. <a href="mailto:kgarcia@baynj.org">kgarcia@baynj.org</a>	City of Bayonne 630 Avenue C Bayonne NJ 07002	Tel: 201-858-6288 Fax-201-858-6092	December-13
Leonard Kiczek, Esq. <a href="mailto:lpkiczek@verizon.net">lpkiczek@verizon.net</a>	Kiczek & Rachinsky PO Box 2 29 W 8th Street Bayonne, NJ 07002-1290	Tel: (201) 437-8787 Fax (201) 437-2329	December-13
Sotiria Makrogiannis <a href="mailto:sot@bielanlaw.com">sot@bielanlaw.com</a>	Floor 2 33 W 8th Street Bayonne, NJ 07002-1287	Tel: (201)436-1198 Fax: (201)436-0314	December-13

<u>Name</u>	<u>TRUSTEE Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Robert E. Margulies <a href="mailto:rem@mwhlawfirm.com">rem@mwhlawfirm.com</a>	Margulies Wind, PC Harborside Fin. Plaza 10, Suite 1201 Jersey City, NJ 07311	Tel: (201)333-0400 Fax (201)333-0011	Fudiciary Reasons
Eric D. McCullough <a href="mailto:edm@lawwmm.com">edm@lawwmm.com</a> <a href="mailto:edm@lawwmm.com">edm@lawwmm.com</a>	Waters, McPherson, McNeil 300 Lighting Way Secaucus, NJ 07096	Tel: (201)863-4400 Fax: (201)863-2866	December-13
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Frances Nicotra <a href="mailto:fnesq@aol.com">fnesq@aol.com</a>	Law Office of Eugene O'Connell 853 Summit Avenue Jersey City, NJ 07307	Tel: (201)963-3668 Fax: (201)963-2005	December-14
Anna Noris <a href="mailto:ldlnpc@yahoo.com">ldlnpc@yahoo.com</a>	Ledesma & Diaz, PC 412 38th Street Union City, NJ 07087-4864	Tel: (201) 867-9310 Fax: (201) 867-3181	December-14
Robert M. Peluso <a href="mailto:robert.peluso@murphypeluso.com">robert.peluso@murphypeluso.com</a>	Murphy Peluso & Cicala 437 60th Street West New York, NJ 07093	Tel: (201)868-1400 Fax: (201)868-6418	December-13
Priya P. Ramrup <a href="mailto:pramrup@hcpc.org">pramrup@hcpc.org</a>	Hudson County Prosecutor 595 Newark Avenue, 6th Fl. Jersey City, NJ 07306	Tel: (201)795-6400. ex. 6761 Fax: (201)795-3365	December-13

<u>Name</u>	<u>TRUSTEE Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Sharon Rivenson Mark <a href="mailto:Rivensonmark@comcast.net">Rivensonmark@comcast.net</a>	Sharon Rivenson Mark, PC 855 Summit Avenue Jersey City, NJ 07307	Tel: (201)239-0300 Fax: (201)239-0331	December-13
Bennett A. Robbins <a href="mailto:BAR@bakerlaw-nj.com">BAR@bakerlaw-nj.com</a>	Javerbaum Wurgaft 1 Newark Street Hoboken, NJ 07030	Tel: (201)659-2635 Fax: (201)659-1400	NJSBF Rep
Kevin Russell <a href="mailto:kevin@krussellesq.com">kevin@krussellesq.com</a>	921 Summit Ave Jersey City NJ 07307	Tel 201 360 3776 Fax 201 360 3741	December-13
Joseph J. Russo, <a href="mailto:joseph.russo@opd.state.nj.us">joseph.russo@opd.state.nj.us</a>	Joseph J Russo, Dep NJ State Ofc Of Public Defender 438 Summit Ave Jersey City, NJ 07306-3158	Tel: (201) 795-8922 Fax: (201) 795-8966	December-13
Maria Vallejo <a href="mailto:mvallejo@chasanlaw.com">mvallejo@chasanlaw.com</a>	Chasan, Leyner & Lamparello 300 Harmon Meadow Blvd. Secaucus, NJ 07094	Tel: (201)348-6000 Fax: (201)348-3366	December-13
Christine Vanek <a href="mailto:cvanek@scarincirollenbeck.com">cvanek@scarincirollenbeck.com</a>	Scarinci Hollenbeck, LLC 1100 Valleybrook Avenue Lyndhurst, NJ 07071	Tel: (201)896-4100 Fax: (201)896-8660	December-13
Richard Villanova <a href="mailto:rvillano@njatty.com">rvillano@njatty.com</a>	Blume Goldfaden 26 Journal Square Jersey City, NJ 07306	Tel: (201) 963-4711 Fax: (201) 963-4706	December-14
Jane Weiner <a href="mailto:jweiner@hcpc.org">jweiner@hcpc.org</a>	Hudson County Prosecutors Office 595 Newark Avenue Jersey City, NJ 07306	Tel: (201)795-6400 Fax: (201)795-3365	December-13

<u>Name</u>	<u>TRUSTEE Address</u>	<u>Telephone &amp; Fax</u>	<u>Term</u>
Michael S. Wittenberg <a href="mailto:MSWittlaw@aol.com">MSWittlaw@aol.com</a>	Law Office of Michael S. Wittenberg 26 Journal Square, Suite 802 Jersey City, NJ 07306	Tel: (201)963-3433 Fax: (201)963-6166	December-13
Suzi Yengo <a href="mailto:suzyroseeq@aol.com">suzyroseeq@aol.com</a>	182 Belmont Avenue Jersey City, NJ 07304	Tel: (201) 433-6705 Fax: (201) 433-3618	December-13
Nadya M. Zerquera <a href="mailto:nmzerqueraesq@aol.com">nmzerqueraesq@aol.com</a>	6809 Bergenline Avenue Guttenberg, NJ 07093	Tel: (201) 869-4168 Fax: (201) 210-4573	December-13

Jeff Jablonski is not listed  
however once he is sworn in,  
we will need to replace him. Term  
Expires 2013

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).  
 Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions. <b>HUDSON COUNTY BAR ASSOCIATION</b>	Employer identification number (EIN) or <b>22-2230712</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>583 NEWARK AVENUE</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>JERSEY CITY, NJ 07306</b>	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (Individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**ALAN C MARGULIES, CPA - HARBORSIDE PLAZA 10, SUITE 1201,**

• The books are in the care of **▶ 3 SECOND ST - JERSEY CITY, NJ 07311**  
 Telephone No. **▶ 201-333-0666** Fax No. **▶**

• If the organization does not have an office or place of business in the United States, check this box  **▶**  
 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **▶** . If this is for the whole group, check this box  **▶** . If it is for part of the group, check this box  **▶** and attach a list with the names and EINs of all members the extension is for.

**4** I request an additional 3-month extension of time until **NOVEMBER 15, 2014.**  
**5** For calendar year **2013**, or other tax year beginning **▶**, and ending **▶**.  
**6** If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period  
**7** State in detail why you need the extension **ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN**

<b>8a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>8a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	0.
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>8c</b>	\$	0.

**Signature and Verification must be completed for Part II only.**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **▶** Title **▶** Date **▶**